

The View

Veterans Information Especially for Women



Reduce Your Heart Disease Risk

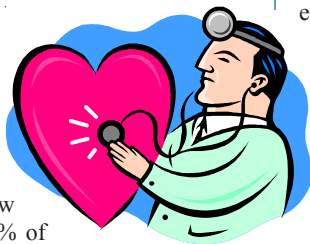
Did you know that heart disease is the leading cause of death for women? Each year approximately 67,000 more women than men die of cardiovascular disease. If you didn't know these facts, you are not alone. Only about 8% of women are aware of this threat.

There is not much that you can do about one of the major risk factors, **heredity** or family history. If your mother had a heart attack before 60, or your father had a heart attack before 50, your risk increases from 25 to 50%. If you fall into this category of risk, it is even more important that you reduce, eliminate, or prevent as many other risk factors as possible.

Other risk factors can be easily identified, treated, and, in many cases, prevented. **High blood pressure**, hypertension, is one of the risk factors. Beginning at age 55, a higher percentage of women than men in the U.S. have high blood pressure. And women with high blood pressure are twice as likely to develop coronary artery disease as women with normal pressure. Have your blood pressure checked regularly. About 1/3 of the estimated over 50 million Americans who have high blood pressure don't even know it. If you do have high blood pressure, work with your health care provider to get it down to normal levels. There are medications that can help treat high blood pressure, but these work much better in combination with life-style changes, such as increased exercise and dietary changes. Discuss a plan for these changes with your provider.

High blood cholesterol is another risk factor. Increased blood levels of LDL cholesterol and triglycerides clog arteries, which can lead to plaque buildup and blockages. HDL cholesterol can help clear plaque from your arteries. Raising HDL offers a greater cardioprotective benefit to women than men. In the Framingham Heart Study it was found that the women with low HDL levels had about six times as many coronary events than those women with higher HDL levels. Exercise and diet are again ways that you can prevent the problem, as well as treat the problem. There are also medications that can help treat high cholesterol, but they are also more effective when combined with improved diets and increased exercise.

High blood glucose levels are another risk factor for heart disease. There are 9.1 million American women with diabetes, compared to 7.8 million men. Having diabetes gives you two to four times the risk of having heart disease as non-diabetics. If you have diabetes, it is important to keep your blood glucose levels within prescribed ranges to reduce your risk. Medications can help to control diabetes, but once again, diet and exercise can be tools that you can use and control to help reduce your blood glucose levels. A well-known risk factor is **smoking**.



Smokers have twice the risk for heart attack than nonsmokers. Cigarette smoking is the most important preventable cause of premature death in the United States. Evidence indicates that chronic exposure to environmental tobacco smoke (secondhand smoke, passive smoking) may also increase the risk of heart disease. There is also evidence to show that your body can repair some of the damage done if you quit smoking. If you are a smoker, quit now for improved health. If you are a smoker and do not wish to quit, be considerate of others and do not smoke in closed spaces around others, especially your family. Limit your smoking to outdoors so that you don't smoke in the house or car. Many people think that they can't quit because they have not *yet* been successful. Sometimes it may take several attempts before you do it. Help is available via Smoking Cessation Groups, and there are some medications that can help. However, probably the most important step is deciding that you want to quit.

Physical inactivity and **poor nutrition** are also risk factors. **Overweight/ obesity** is an additional risk factor that is linked to some other risk factors. A new Mayo Clinic study found that overweight people (BMI of 25-29) have heart attacks 3.6 years earlier than people of normal weight. Additionally, those who were obese (BMI of 30 or higher) have heart attacks 8.2 years earlier. Obesity, especially in those who carry excess weight more in the abdomen, increases the likelihood of developing high blood pressure and diabetes. Also, people who are at least 20 pounds over their ideal weight are more likely to develop heart disease, even if they have no other risk factors. It has been found that combinations of present risk factors, even if they are at low levels, increase your risk of cardiac disease.

What should you do to prevent the development of risk factors, or to reduce your risk factors? First, **eat a healthy diet!** Your diet should be low in saturated fat and cholesterol, include plenty of fruits and vegetables, include whole grains, lean protein, and low-fat dairy products and have normal-size portions. Your dietician can provide more information on appropriate diet requirements. Second, **lose weight, if needed, and maintain a healthy weight.** Third, **be physically active** by getting in at least 30 minutes of aerobic exercise five to seven days/week. Brisk walking can be a good exercise. Check with your healthcare provider, as you may need to build up slowly if you have been very inactive. Fourth, **stop smoking!** You can figure out a way, and you can get help. Fifth, **keep your blood pressure, cholesterol, triglyceride, and blood sugar levels in the normal ranges.** Work with your provider to come up with a plan that will be effective.

Heart disease is such an important topic for women that we are sponsoring several programs to educate our women veterans about it. One was held in Gainesville and one in Ocala. The next one will be in Lake City on August 14. See the upcoming events column in this newsletter for more details. Watch in future newsletters for any additional locations.

Library Corner

By MARSHA WHITE



Nearsightedness has been my lot ever since 5th grade, when I got my first set of glasses. I will never forget the wonder I felt when I could finally see the blackboard in class and recognize people's faces from a distance. Even though we understand how valuable our senses are to us, I think we sometimes take our sight and hearing for granted.

Scientific advances in medicine and surgery have greatly improved methods of coping with eye and ear problems. In *The Eye Book* (WW 140 C344 1998), Cassel, Billig, and Randall give an extensive and well written overview of the eye and how it works, vision changes throughout the lifespan, eye examinations, how to select eyeglasses and contact lenses, major and minor eye disorders, medications, and general health problems that can affect the eyes.

I don't mind wearing eyeglasses, especially after a very brief and disastrous flirtation with contacts. However, many people have had corrective surgery to eliminate the need for glasses. The *Complete Book of Laser Eye Surgery* (WW 220 S631 2000) by Slade, Baker, and Brockman takes a thorough look at radial keratotomy (RK), laser (LASIK), and photorefractive keratectomy (PRK) surgery.

The authors discuss risks, expectations, and complications as well as the latest cutting edge techniques. Kornmehl, Maloney, and Davidorf zero in on laser vision correction in their brief book entitled *LASIK* (WW 220 K84 2001). They cover benefits and risks of LASIK, how to select a qualified physician, and follow-up care.

As we age, our eyes age, too. In *The Aging Eye* (WW 620 G665a 2001), Sandra Gordon from Harvard Medical School looks at common eye disorders that accompany old age, including floaters, retinal detachment, and dry eye syndrome. There are separate chapters that discuss cataracts, glaucoma, and macular degeneration and how to cope with them. Gordon also stresses the importance of regular checkups and good nutrition in preventing and limiting vision impairment. Edith Marks, in *Coping with Glaucoma* (WW 290 M346c 1997), provides useful advice for people who are already dealing with this condition.

In easily understood language, she explains the tests and procedures used to diagnosis glaucoma, describes traditional and alternative treatments, and suggests nutrition and life-style changes to help reduce stress.

Over 13 million Americans experience age-related macular degeneration (ARMD), a deterioration of central vision. *Macular Degeneration* (WW 270 D25 2000) by D'Amato and Snyder provides an insight into the latest scientific discoveries and treatments for this disorder. The authors explain the two types of ARMD (dry and wet), treatment options, and coping strategies, including the use of low vision support tools and ideas for modifying

your home environment. Another helpful tool for people with ARMD is Bert Glaser and Lester Picker's *The Macular Degeneration Source Book* (WW 270 G548 2002). Here the authors clearly delineate symptoms, risk factors, diagnosis, and treatment for ARMD in addition to providing ideas for creating 'eye-friendly' home and work environments. They even include a chapter on travel and recreation as well as a list of online resources, organizations, and visual aid products and catalogs.

Two books deal with that other important sense – hearing. *The Consumer Handbook on Hearing Loss and Hearing Aids* (WW 270 C758 1998) looks at the emotional aspects of losing one's hearing, specific products and assistive devices to help manage hearing loss, and available resources and organizations.

Researchers and clinicians have written all the books I've discussed so far. They present basic facts in a clearly written but relatively impersonal manner. Far different is *A Quiet World: Living with Hearing Loss* (WW 270 M996 2000). Here psychologist David Myers describes his own personal journey of hearing deterioration. Written in the form of journal entries, Myers takes us from his first recognition of a problem to his acceptance and adjustment. Uplifting and optimistic, this book is a 'good read' whether you have a hearing problem or not.

Home Safety and Crime and Injury Prevention

A program for women veterans was held in Ocala at the expanded VA Outpatient Clinic on May 12, 2003. Debbie Harper, a nurse practitioner in our Home-Based Primary Care, spoke about injury prevention around the home. She gave many practical tips about finding and correcting safety hazards around the home. Each year home accidents injure over 21 million people and kill about 20,000.

Tina Brito, an Ocala Police officer of over 14 years and also a woman veteran, spoke about crime prevention. She reminded us to be alert for scams that may be especially aimed at the elderly and gave some examples of these. She also discussed things that we can do to make ourselves less vulnerable to crime. Some examples were to park only in well-lighted areas, always keep your home and car doors locked, invest in and install good locks on doors and windows. Others were to not carry a lot of cash, carry your purse close to your body, and use direct deposit for Social Security and other regular checks.

The next program in Ocala will be in early fall. Look in the next edition of *The VIEW* for the date and more details. The planning committee for Ocala Programs includes Olga Cross, Margaret Fairchild, and Ella Mae Gibson, Chairperson. If you have ideas about future programs you'd like to see, contact one of these planning committee members or Carole Bonds, Women Veterans Program Manager for North Florida/South Georgia Veterans Health System.

Upcoming Events

Mark your calendar so you won't forget!

The monthly lecture series continues on the 3rd Thursday of each month in Gainesville, Room E-526. It's a time to learn about a health topic and meet some other women veterans. We also have refreshments together. We have had wonderful speakers who have provided excellent information. Please join us so that you can be an educated healthcare consumer. Special note to women veterans who are also VA employees- You can get one hour of education credit for attendance.

Thursday, July 17, 10-11 AM Home Safety and Crime Prevention

Milt Gordon and John Zirkelbach,
VA Police and Security
Gainesville VAMC, Room E-526

Thursday, August 14, 11AM-1PM Heart Health for Women Program

Speaker: Eileen Handberg, Ph.D.,
A.R.N.P. 11AM- 12 Noon
Assistant Professor of Medicine and
Director of Clinical Programs
Division of Cardiovascular Medicine,
University of Florida
Posters, Handouts, and Refreshments
12 Noon- 1PM
Lake City VAMC Auditorium

Thursday, August 21, 10-11 AM Depression in Women

Linda Feldthausen, Ph.D.,
Clinical Psychologist,
Gainesville VA Medical Center
Gainesville VAMC, Room E-526

Thursday, September 18, 10 AM Recognizing Dementia and Treatment

Ann Goodwin, M.S.N.,
Clinical Specialist, Gerontology,
Gainesville VAMC
Gainesville VAMC, Room E-526

North Florida/South Georgia Veterans Health System

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